

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L08000034631
FILED 8:00 AM
April 04, 2008
Sec. Of State
mthomas

Article I

The name of the Limited Liability Company is:
CHIROPOD MEDICAL, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:
3594 EVANS AVENUE
FORT MYERS, FL. 33901

The mailing address of the Limited Liability Company is:
3594 EVANS AVENUE
FORT MYERS, FL. 33901

Article III

The purpose for which this Limited Liability Company is organized is:
RENDERING THE CARE AND TREATMENT OF INDIVIDUALS.

Article IV

The name and Florida street address of the registered agent is:
GERGOIRE GARCON DPM
3594 EVANS AVENUE
FORT MYERS, FL. 33901

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: GERGOIRE GARCON

Article V

The name and address of managing members/managers are:

Title: MGR
GERGOIRE GARCON
3594 EVANS AVENUE
FORT MYERS, FL. 33901

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Article VI

The effective date for this Limited Liability Company shall be:

04/04/2008

Signature of member or an authorized representative of a member

Signature: GERGOIRE GARCON